

BEST AVAILABLE COPY

ISSUE SLIP STAFF (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|-------------------|----------|--------|----------|
| FEE DETERMINATION | ND | 71534 | 01-12-99 |
| I.P.E. CLASSIFIER | | 25 | 01-14-99 |
| FORMALITY REVIEW | cg | 76284 | 1-24-99 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 + Allowed I Interference
 - (Through numeral) Canceled A Appeal
 0 Restricted O Objected

| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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